

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/576620

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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148						
149						
150						
TOTAL IND.			↓	60	↓	↓
TOTAL DEP.			←	118	←	←
TOTAL CLAIMS			54			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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200						
TOTAL IND.					↓	↓
TOTAL DEP.			←		←	←
TOTAL CLAIMS						